Fill in this information to identify your case:					
Debtor 1	Suzana T. Novak				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF OHIO		
Case number	19-34028				
(if known)		<del></del>			

Check if this is an amended filing

### Official Form 106Sum

the court with your other schedules.

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Official Form 106Sum

# **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

page 1 of 2

Best Case Bankruptcy

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t1: Summarize Your Assets		
		Your as	sets f what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	265,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	8,755.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	273,755.00
Par	t2: Summarize Your Liabilities		
		Your lia Amount	<b>bilities</b> you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	3,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	0.00
	Your total liabilities	\$	3,000.00
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,116.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,718.00
<sup>2</sup> ar	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	edules.
7.	Yes What kind of debt do you have?		

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Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,076.00

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	3,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	3,000.00

Fill	in this info	ormation to identify your c	ase:						
Del	btor 1	Suzana T. Novak							
		First Name	Middle Name	Last Nam	ne				
	btor 2 buse if, filing)	First Name	Middle Name	Last Nam	ne				
	-	Bankruptcy Court for the:	NORTHERN DI	STRICT OF OHIO					
		, ,							
	se number nown)	19-34028					■ Check	if this is an	
								ed filing	
Ot €	ficial Fo	rm 1065/5							
		<u>rm 106E/F</u> <b>E/F: Creditors W</b>	ho Havo Hr	neocured Claim				12/15	
		and accurate as possible. Use				craditors with NON	DDIODITY claims 1 i		v to
Scho Scho left. nam	edule G: Exe edule D: Cred Attach the C e and case n	ontracts or unexpired leases ocutory Contracts and Unexpiditors Who Have Claims Sectiontinuation Page to this pagenumber (if known).	red Leases (Officia red by Property. If e. If you have no in	al Form 106G). Do not incl f more space is needed, co	ude any cred opy the Part	itors with partially s you need, fill it out,	secured claims that a number the entries in	re listed in the boxes on t	he
		All of Your PRIORITY Uns							_
1.	Do any cred  ☐ No. Go to	litors have priority unsecured	l claims against yo	·u?					
	_	ο Ραπ 2.							
2.	Yes.	our priority unsecured claims	If a creditor has me	ore than one priority unsecu	ırad claim list	the creditor separate	ly for each claim. For	aach claim listed	
۷.	identify what possible, list	type of claim it is. If a claim hat the claims in alphabetical orde re than one creditor holds a par	s both priority and no according to the cr	onpriority amounts, list that reditor's name. If you have r	claim here an	d show both priority a	and nonpriority amount	s. As much as	
	(For an expla	anation of each type of claim, so	ee the instructions fo	or this form in the instruction	n booklet.)	Total claim	Priority amount	Nonpriority amount	
2.1		al Revenue Service	Last 4	digits of account number	•	\$3,000.00	\$3,000.00	\$0.	00
	•	Creditor's Name alized Insolvency Oper	ation When	was the debt incurred?	2019				
		Office Box 7346					-		
		delphia, PA 19101 r Street City State Zip Code	As of t	the date you file, the claim	n is: Check all	that apply			
	Who incur	red the debt? Check one.	☐ Co	ntingent					
	■ Debtor	1 only	☐ Unl	liquidated					
	Debtor 2	2 only	☐ Dis	sputed					
	Debtor :	1 and Debtor 2 only	Туре	of PRIORITY unsecured cl	aim:				
	☐ At least	one of the debtors and another	. Do	mestic support obligations					
	☐ Check i	if this claim is for a commun	ity debt Tax	xes and certain other debts	you owe the o	jovernment			
	_	n subject to offset?	☐ Cla	aims for death or personal in	ijury while you	were intoxicated			
	■ No		☐ Oth	ner. Specify	•	0010			
	☐ Yes			Taxes due	trom tax	year 2018			
Pai		All of Your NONPRIORIT							—
3.	Do any cred	litors have nonpriority unsec	ured claims agains	st you?					
	No. You h	have nothing to report in this pa	rt. Submit this form	to the court with your other	schedules.				
	☐ Yes.								
Pai	rt 3: List	Others to Be Notified Abo	out a Debt That \	You Already Listed					
is h	trying to col ave more tha	only if you have others to be llect from you for a debt you an one creditor for any of the by debts in Parts 1 or 2, do no	owe to someone e debts that you list	lse, list the original credit ed in Parts 1 or 2, list the	or in Parts 1	or 2, then list the co	llection agency here	Similarly, if you	ı İ

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

type of unsecured claim.

Schedule E/F: Creditors Who Have Unsecured Claims

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Official Form 106 E/F

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Page 1 of 2

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	3,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	3,000.00
					Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	0.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	0.00

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 2

Fill in this information to identify your case:					
Debtor 1	Suzana T. Novak				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF OHIO		
Case number	19-34028				
(if known)					

Check if this is an amended filing

#### Official Form 106Dec

# **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is	s NOT an attorney to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have that they are true and correct.  X /s/ Suzana T. Novak Suzana T. Novak Signature of Debtor 1	read the summary and schedules filed with this declaration and  X Signature of Debtor 2
Date <b>January 10, 2020</b>	Date

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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Best Case Bankruptcy

## United States Bankruptcy Court Northern District of Ohio

In re	Suzana T. Novak		Case No.	19-34028	
		Debtor(s)	Chapter	7	
	VERIFICATI	ON OF CREDITOR MATR	IX - AMEN	IDED	
Γhe ab	ove-named Debtor hereby verifies that	at the attached list of creditors is true and c	correct to the best	of his/her knowledge.	
Date:	January 10, 2020	/s/ Suzana T. Novak			
		Signature of Debtor			

Internal Revenue Service Centralized Insolvency Operation Post Office Box 7346 Philadelphia, PA 19101